

ALBERT G. & BERNICE F. HANSEN FOUNDATION SCHOLARSHIP

APPLICATION

Please print or type.

SECTION I: To be completed by applicant.

Students Full Name: _____

Date of Birth: _____

Full name of parent or guardian: _____

Telephone Number: _____

Permanent address of parent or guardian: _____

What college, university or trade school do you plan to attend?

Date you expect to enter (Month/Year) _____

What is your intended major? _____

In the space below, briefly summarize your school and community activities. List organizations of which you are a member and offices held:

In the space below, explain why you believe you should be awarded this scholarship:

Signature of Applicant

SECTION II: Information to be supplied by Principal or Counselor

This is to certify that the applicant ranks _____ of _____ seniors,
and has a cumulative grade point average of: _____

Date of high school graduation will be _____, 20__

How would you compare the applicant to the entire class? (Please check the single most appropriate category.)

					Outstanding (one of the top few)
Below Average	Average	Good	Excellent		

Academically:

Personality:

Overall:

Principal or Counselor

Date

Application must be submitted on or before _____ to:

Wauneta-Palisade High School
Scholarship Selection Committee
P.O. Box 368
Wauneta, NE 69045-0368